

ADDENDUM No. 02		LSU	BID DUE DATE AND TIME	
BOARD OF SUPERVISORS OF LOUISIANA STATE UNIVERSITY AND AGRICULTURAL & MECHANICAL COLLEGE			11/04/2014	11:00 AM CT
SOLICITATION 000013147 VENDOR # VENDOR NAME AND ADDRESS <div style="border: 1px solid black; height: 80px; width: 100%;"></div>			RETURN ADDENDUM TO FAX # (225)578-2292 LSU LOUISIANA STATE UNIV. PURCHASING OFFICE 213 THOMAS BOYD HALL Baton Rouge LA 70803 BUYER Courtney Thompson BUYER PHONE (225)578-8651 ISSUE DATE 10/20/2014	
TITLE: PRINTING: BANNERS AND BROCHURES				
<p>Notice is given to all parties that this Solicitation is amended by the University as stated herein. This Addendum is hereby made an official part of this Solicitation.</p> <p>SPECIFICATION CHANGE: BROCHURE, LINE ITEM # 13 & 14 - CHANGE GRAPHIC TO 20" X 8.75" FOLDS AND DELETE "THEN COVER WRAP". LINE ITEM 14 QUANTITY SHOULD BE DECREASED TO 35,000.</p> <p>This Addendum should be signed and returned with your bid or otherwise acknowledged therein. If you have already submitted your bid, and this Addendum creates a need to revise/clarify your original response in any way, you are required to submit such in writing. For revisions/clarifications to be considered, your addendum response must be submitted to and received by the issuing LSU Campus/Department at the "Return Bid To" address stated above no later than the specified bid due date/time and must be clearly marked with the solicitation number and the bid due date/time and returned via fax, courier service, hand delivery, or USPS mail. Bid revisions received after bid opening cannot be considered, whereupon the bidder must either honor or withdraw its original bid.</p> <p>Bidder's Addendum Acknowledgement/Response:</p> <p>As an authorized agent/signatory of the bidder, I/we acknowledge receipt of this Addendum, and _____ submit no alterations/clarifications to our original bid. _____ submit superseding revisions/clarifications to our original bid as written herein or attached hereto.</p>				
BIDDER (Name of Firm)			MAILING ADDRESS	
AUTHORIZED SIGNATURE			CITY, STATE ZIP	
PRINTED NAME			PHONE #	
TITLE			FAX #	
E-MAIL			FEDERAL TAX ID #	